

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

Y 678

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

The time that to correction of each violation is specified in the married to			
Establishment Name	Telephone Number	Date of Ins (mm/dd/yr	
New Albany Springs Golf Course Establishment Address (number and street, city, state, zip code)	812-949-5040	.	10(-
Establishment Address (number and street, city, state, zip code) 1706 Greybrook Ln New Albany W 47150	0 812-946-2392	2-17.	214
Owner	Purpose:	Follow-u	
Cary Hammond	1. Routine	NO	10 doy
Owner's Address	2. Follow-up	Summary	of Violations:
Person in Charge Cary Hammond	3. Complaint 4. Pre-Operational	<u>Ø</u>	NCR
Responsible Person's E-mail	5. Temporary	Menu Typ	e (See back of page)
•	6. HACCP		•
Certified Food Manager N/A - Meju Type I	7. Other (list)	1_2	345
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUM	NS MARKED "C"		
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE		ID IN THE N	(ARRATIVE RELOW AS "R"
Section# C/NC R Narrative	·-	·	To Be Corrected By
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410 NC Observed light sets shield	Missing over		4 vers
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	37.		
	, 374		
	57.	,	
Passived by (name and title printed):		winted):	
Received by (name and title printed): CARY HAMMOND - MANAGE	Inspected by (name and title p	orinted): Snide	, EHS
	Inspected by (name and title p	orinted): Sni Je	r, EHS
CARY HAMMOND - MANAGE	Inspected by (name and title p	orinted): Snide	, EHS